PATENT APPLICATION FEE DETERMINATION RECO								Application or Docket Number					
Effective October 1, 2003									Ft-	//	612		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR	OTHER THAN OR SMALL ENTITY		
TC	TAL CLAIMS		58					RATE	FEE	]	RATE	FEE .	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			// minus 20=		* 3.5			X\$ 9=		OR	X\$18=	684	
INDEPENDENT CLAIMS			/ minus 3 ≐		* 24			X43=		ÓR	X86=	344	
MU	ILTIPLE DEPEN	IDENT CLAIM P	RESENT			+14				OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column								TOTAL		OR	TOTAL	1798	
-	CLAIMS AS AMENDED - PART II									3.	OTHER		
	1-6-01	(Column 1)		(Column 2) (Column 2)		(Column 3)	1 1	SMAL	LENTITY	OR 1	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUMI PREVIO	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	OF⁄	RATE	ADDI- TIONAL FEE	
	Total	. 52	Minus	<b>~</b> 5	8	= /		X\$ 9=			X\$18=		
	Independent	. 7	Minus	*** /	7	-/		X43=		OR	X86=	-	
	FIRST PRESE	JLTIPLE DEI	TIPLE DEPENDENT CLAI				+1.45=		OR	+290=			
								TOTA			TOTAL ADDIT. FEE		
		(Column 3)		ADDIT. FE	5/		ADDII. FELL						
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colur HIGH NUMI PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total <sup>-</sup>	*	Minus	** .	•	=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	###	.:	=		X43=		OR	X86=		
Ľ	FIRST PRESE	ENDENT CLAIM			╛┆	+145=		OR	+290 <u>-</u>				
				_				TOTA	ı.		TOTAL		
		• •							E	Jon	ADDIT. FEE		
		(Column 1) CLAIMS	· · · · · · · · · · · · · · · · · · ·	(Colun		(Column 3)	1 r		LABBI			ADDI	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE.		RATE	ADDI- TIONAL FEE	
	Total '	*	Miņus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Miņus	***		<u> </u>		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J þ				•	·	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290= TOTAL		
** If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 20, enter "20." ADDIT. FEE										OR	ADDIT. FEE		
	The "Highest Num	nber Previously Pai	d For" (Total o	Independe	ent) is the	highest number	er fou	nd in the a	appropriate bo	x in col	umn 1.	. •	